

A 53 years-old male with chest pain was noted to have a posterior mediastinal mass thought to be of neurogenic origin on computed tomography scan. The patient was admitted to our hospital for elective surgery. Thorax computed tomography showed the presence of a 2,5cm solid soft tissue lesion in the subpleural location of left lung basal segment on the paravertebral area (Figure 1). During surgery the lesion was appeared to be an intralobar sequestration and aberrant vessel was arising from the thoracic aorta (Figure 2). Sequestered lobe was resected (Figure 3). Histopathological examination confirmed a diagnosis of pulmonary sequestration.

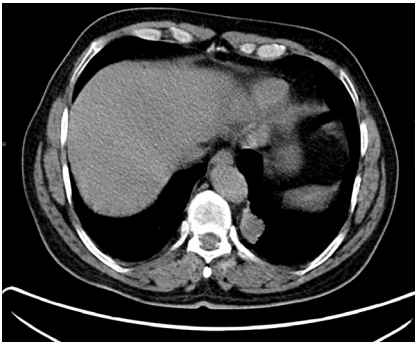


Figure 1. Thorax computed tomography image in the axial plane.

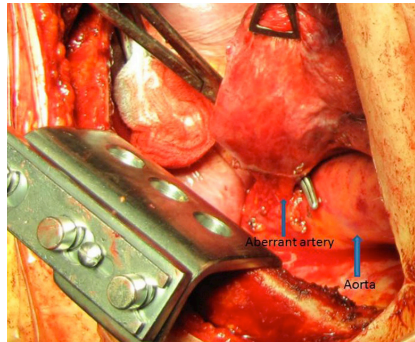


Figure 2. View of the aberrant vessel in the operation.

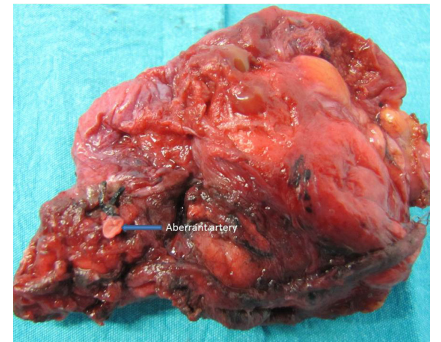


Figure 3. View of the sequestered lobe, aberrant vessel marked with arrow.